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## PART B - FEE(S) TRANSMITTAL

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| INST                          | PLICTIONS: This fo  | orm should be used for tran   | amitting the ICCI                                    |  | Fax   | (703) 746-4000   | simal) Dialantah 1.6  | 3 11 1  |  |  |  |
| appro<br>indica<br>maint      | priate. All further co<br>ted unless corrected<br>enance fee notificatio  | prespondence including the below or directed otherwise ons.                                       | Patent, advance of in Block 1, by (                  | rders and not<br>a) specifying                     | tification<br>a new c   | of maintenance fees<br>correspondence address  | will be mailed to the current; and/or (b) indicating a se                                       | should be completed where<br>at correspondence address as<br>parate "FEE ADDRESS" for                                   |  |  |  |
|                               | <del></del>   | CE ADDRESS (Note: Use Block 1 for   | any change of address)                               |  |   | Note: A certificate o  | f mailing can only be used  | for domestic mailings of the  |  |  |  |
| -                             |   | 7590 03/08/2005   |  | OIPE   |   | Fee(s) Transmittal. T<br>papers. Each addition<br>have its own certifica   | his certificate cannot be used<br>al paper, such as an assignr<br>te of mailing or transmission | for domestic mailings of the<br>d for any other accompanying<br>nent or formal drawing, mus                             |  |  |  |
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|                               | .D. BOX 802432<br>PALLAS, TX 753  |   | 1  |  | 9   | States Postal Service  | nis ree(s) Transmittal is be-<br>with sufficient postage for f                                  | ng deposited with the United<br>irst class mail in an envelope<br>is above, or being facsimile<br>date indicated below. |  |  |  |
|                               | 005 BABRAHA2 000  |   | ٦  | MAY 17   | 2005  | taddressed to the Ma   | il Stop ISSUE FEE addres<br>PTO (703) 746-4000, on the  | ss above, or being facsimile  |  |  |  |
|                               |   |   | Ħ  | MAY 17   | . 6   | Marcus   | Todd  | (Depositor's name)  |  |  |  |
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|                               | 09/593,215  | 06/14/2000  |  | Jari M. I  | Heinoner  | 1  | 1999-0336 (STG162)  | 8321  |  |  |  |
| PLUR                          | ALIT OF STREET  | CONIZATION INDICATOR  | .5   |  | IN IN A   | MULTIPLE-CARRIE  | R COMMUNICATION SY  | STEM BY OBSERVING A   |  |  |  |
| L                             | APPLN. TYPE   | SMALL ENTITY  | ISSUE F  | EE   | P(  | JBLICATION FEE   | TOTAL FEE(S) DUE  | DATE DUE  |  |  |  |
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| I. Cha                        | ge of correspondence  | e address or indication of "Fo  | ee Address" (37                                      | 2. For prin  | nting on 1  | the patent front page, li  | st .  |   |  |  |  |
| CFK                           | CFR 1.563).   |   |  |  |   |  |   |   |  |  |  |
| 70                            | Address form PTO/SB/122) attached.  |   |  |  | or agents OR, alternatively,  (2) the name of a single firm (having as a member a |  |   |   |  |  |  |
| rn                            | Ifee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. |   |  |  |   |  |   |   |  |  |  |
| 3. ASS                        | GNEE NAME AND   | RESIDENCE DATA TO B   | E PRINTED ON T                                       | THE PATENT   | (print o  | r type)  |   |   |  |  |  |
| PLI                           | ASE NOTE: Unless<br>redation as set forth in  | an assignee is identified be 37 CFR 3.11. Completion of   | low, no assignee of this form is NO                  | data will app<br>T a substitute                    | ear on the  | ne patent. If an assign<br>an assignment.  | ee is identified below, the   | document has been filed for   |  |  |  |
| (A)                           | NAME OF ASSIGN  | EE  | <b>(</b> B   | ) RESIDENC   | E: (CIT   | Y and STATE OR CO  | JNTRY)  |   |  |  |  |
|                               | Cingular Wire   | less II, LLC  |  | Atlanta, G   | βA  |  |   |   |  |  |  |
| Please                        | theck the appropriate   | assignee category or categor  | ries (will not be pr                                 | inted on the n                                     | atent) :  | Individual 🖾 🖸   | omoration or other private  | oup entity Government   |  |  |  |
| 4a. The                       | following fee(s) are  |   |  | . Payment of                                       |   |  | reportation of other private gr   | oup chinty Covernment   |  |  |  |
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| W.                            | dvance Order - # of   | Copies 10   |  | The Dire   | ctor is h   | ereby authorized by cl   | narge the required fee(s), or   | credit any overpayment, to copy of this form).  |  |  |  |
| 5 Cha                         | go in Entity Status   | (from status indicated above  |  | Deposit Acco                                       | ount Nun  | nber <u>50-0208</u>  | (enclose an extra   | copy of this form).   |  |  |  |
| J. C.II.                      |   | MALL ENTITY status. See 3   |  | ☐ b. Applica                                       | ant is no   | longer claiming SMA  | LL ENTITY status. See 37 C  | EP 1 27(a)(2)   |  |  |  |
| The Di<br>NOTE:<br>interest   | ector of the USPTO i  | is requested to apply the Issu<br>ablication Fee (if required) w<br>rds of the United States Pate | e Fee and Publicat                                   | ion Fee (if an                                     | y) or to r<br>other th  | e-apply any previousl<br>an the applicant; a regi  | y paid issue fee to the applic<br>stered attorney or agent; or t                                | ation identified above.<br>he assignee or other party in  |  |  |  |
| Aut                           | orized Signature  | with  |  | <u></u>  |   | Date &   | 11215   |   |  |  |  |
| Тур                           | d or printed name   | Matthew S. Ander  |  |  |   | Registration   |   |   |  |  |  |
| This co<br>an appl<br>submitt | lection of information<br>cation. Confidentialing<br>the completed ap   | n is required by 37 CFR 1.31<br>ty is governed by 35 U.S.C.<br>plication form to the USPTC        | 1. The information 122 and 37 CFR 10. Time will vary | n is required t<br>1.14. This coll<br>depending up | o obtain<br>lection is<br>on the in   | or retain a benefit by to<br>estimated to take 12 redividual case. Any co  | ne public which is to file (an<br>ninutes to complete, including<br>mments on the amount of ti  | d by the USPTO to process) ng gathering, preparing, and me you require to complete                                      |  |  |  |

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DOCKET NO.: ATTW01-00037

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

re application of:

Jari M. Heinonen et al.

Application No.

: 09/593,215

Filed

June 14, 2000

For

APPARATUS AND METHOD FOR SYNCHRONIZATION IN A MULTIPLE-CARRIER COMMUNICATION SYSTEM

BY OBSERVING A PLURALITY OF

SYNCHRONIZATION INDICATORS

Group No.

2666

Examiner

Phuc H. Tran

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

## **CERTIFICATE OF MAILING BY EXPRESS MAIL**

The undersigned hereby certifies that the following documents:

- 1) Part B Issue Fee Transmittal (in duplicate);
- 2) Check in the amount of \$1,430.00 for issue fee (\$1,400.00) and soft copies of patent (\$30.00);
- 3) Fee Transmittal for FY 2005 (in duplicate); and
- 4) A Postcard receipt

relating to the above application, were deposited as "Express Mail", Label No. EV640159600US with the United States Postal Service, addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on May 17 2005.

Date: \_\_\_\_S/17/05

Date: 5 17/5

Matthew S. Anderson

Reg. No. 39,093

P.O. Box 802432

Dallas, Texas 75380 Phone: (972) 628-3600 Fax: (972) 628-3616

E-mail: manderson@davismunck.com

| 1 2005 El<br>Under the Paperwork Reduct   | ation Act of 1005, no persons are re                     | required to r  |   | nt and Tradem            | nark Office; U.S               | S. DEPARTME                          | PTO/SB/17 (12-04)<br>006. OMB 0651-0032<br>ENT OF COMMERCE |
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| For pursuant to the Consolid  | idated Appropriations Act, 2005 (H.                      |                | Application Nun   |                          | 9/593,215                      |                                      |  |
| FEETH   | RANSMITT   | AL '           | Filing Date   |                          | ine 14, 200                    | 00                                   |  |
| l Fo  | or FY 2005   | !              | First Named Inv   |                          | ari M. Heino                   |                                      |  |
|   |  |                | Examiner Name   | е р                      | huc H. Tran                    | 1                                    |  |
| Applicant claims smai   | III entity status. See 37 CFR 1.                         | .27            | Art Unit  |                          | 366                            |                                      |  |
| TOTAL AMOUNT OF PAY   | YMENT (\$) 1,430.00                                      |                | Attorney Docker   |                          | TTW01-000                      | )37                                  |  |
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| WARNING: Information on thi<br>information and authorization                          | is form may become public. Cred<br>n on PTO-2038.        | dit cara ını   | formation should no   | ot be include            | ed on this for                 | m. Provide cre                       | edit card  |
| FEE CALCULATION   |  |                |   |                          |                                |                                      |  |
| 1. BASIC FILING, SEA  | RCH, AND EXAMINATION                                     |                |   |                          |                                | -                                    |  |
|   | FILING FEES Small Entity                                 | SEAR           | RCH FEES Small Entity   | EXAMIN                   | IATION FEE<br>Small Entity     | tv                                   |  |
| Application Type  | Fee (\$) Fee (\$)  | <u>Fee (\$</u> | Fee (\$)  | Fee (\$)                 | Fee (\$)                       | <u>Fe</u>                            | es Paid (\$)   |
| Utility   | 300 150  | 500            | 250   | 200                      | 100                            |                                      |  |
| Design  | 200 100  | 100            | 50  | 130                      | 65                             | <del></del>                          |  |
| Plant   | 200 100  | 300            | 150   | 160                      | 80                             | <del></del>                          |  |
| Reissue   | 300 150  | 500            | 250   | 600                      | 300                            |                                      |  |
| Provisional   | 200 100  | 0              | 0   | 0                        | 0                              |                                      |  |
| 2. EXCESS CLAIM FEE Fee Description   | <b>ES</b>  |                |   |                          |                                | Fee                                  | Small Entity<br>e (\$) Fee (\$)                            |
| Each claim over 20 or, for  | or Reissues, each claim ove                              |                |   |                          |                                | 5                                    | 50 25  |
| Each independent claim  | over 3 or, for Reissues, eac                             |                |   |                          |                                |                                      | 00 100   |
|   | Multiple dependent claims                                |                |   |                          | Parandont (                    |                                      | 60 180   |
| 20 or HP =  | Extra Claims Fee (\$)                                    | ree i          | <u>Paid (\$)</u>  | Fee (\$                  | Dependent C                    | ee Paid (\$)                         | 1  |
| HP = highest number of total  | claims paid for, if greater than 20                      | _              |   |                          |                                | 99 1, 41-4, 17.1                     |  |
| Indep. Claims - 3 or HP =   | Extra Claims Fee (\$)                                    | Fee F          | Paid (\$)   |                          |                                |                                      |  |
|   | pendent claims paid for, if greater th                   | than 3         |   |                          |                                |                                      | ļ  |
| 3. APPLICATION SIZE If the specification and for each additional Total Sheets - 100 = | d drawings exceed 100 sheet 50 sheets or fraction thereo | of. See 3      | per, the applicat<br>35 U.S.C. 41(a)(<br>h additional 50 o<br>(round up to a w                          | (1)(G) and or fraction t | 137 CFR 1.<br>thereof <u>F</u> | 250 (\$125 fo<br>.16(s).<br>Fee (\$) | or small entity)   |
| 4. OTHER FEE(S)   | ication, \$130 fee (no smal                              | all entity     |   | 110.0                    |                                |                                      | Fees Paid (\$)   |
|   | (,400.00) and copies of pate                             | •              | ,   |                          |                                | - !                                  | \$1,430.00   |
| στιστ. <u>Issue Fee (ψ 1,400.00) and copies of patent (ψ30.00)</u>                    |  |                |   |                          |                                |                                      |  |

SUBMITTED BY Registration No. 39,093 Telephone 972-628-3600 Signature (Attorney/Agent) Name (Print/Type) Matthew S. Anderson Date

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